

MEMORANDUM

Agenda Item No. 14(A)(2)

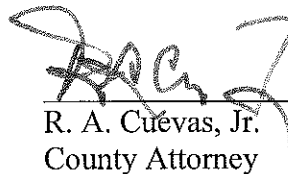
TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: February 5, 2013

FROM: R. A. Cuevas, Jr.
County Attorney

SUBJECT: Resolution authorizing in-kind
services for the March 3, 2013
"Liga Contra El Cancer's Sixth
Annual Walk-A-Thon"
sponsored by Liga Contra El
Cancer, Inc.

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Chairwoman Rebeca Sosa.



R. A. Cuevas, Jr.
County Attorney

RAC/lmp




MEMORANDUM

(Revised)

TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: February 5, 2013

FROM: 
R. A. Cuevas, Jr.
County Attorney

SUBJECT: Agenda Item No. 14(A)(2).

Please note any items checked.

- ☐ "3-Day Rule" for committees applicable if raised
- ☐ 6 weeks required between first reading and public hearing
- ☐ 4 weeks notification to municipal officials required prior to public hearing
- ☐ Decreases revenues or increases expenditures without balancing budget
- ☐ Budget required
- ☐ Statement of fiscal impact required
- ☐ Ordinance creating a new board requires detailed County Mayor's report for public hearing
- ☒ No committee review
- ☐ Applicable legislation requires more than a majority vote (i.e., 2/3's ____, 3/5's ____, unanimous ____) to approve
- ☒ Current information regarding funding source, index code and available balance, and available capacity (if debt is contemplated) required

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 14(A)(2)
2-5-13

RESOLUTION NO. _____

RESOLUTION AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION, AND OPEN SPACES DEPARTMENT FOR THE MARCH 3, 2013 "LIGA CONTRA EL CANCER'S SIXTH ANNUAL WALK-A-THON" SPONSORED BY LIGA CONTRA EL CANCER, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$3,887.21 TO BE FUNDED FROM THE BALANCE OF THE OFFICE OF THE CHAIR FY 2012-13 IN-KIND RESERVE FUND

WHEREAS, Liga Contra El Cancer, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department for the March 3, 2013 "Liga Contra El Cancer's Sixth Annual Walk-A-Thon" in an amount not to exceed \$3,887.21 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Liga Contra El Cancer's Sixth Annual Walk-A-Thon" is a fundraiser which supports cancer research and free cancer care for the most needy residents in the County; and

WHEREAS, Liga Contra El Cancer, Inc. is a not-for-profit organization; and

WHEREAS, the "Liga Contra El Cancer's Sixth Annual Walk-A-Thon" is a special event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$3,887.21 of the in-kind services shall be funded from the balance of the Office of the Chair FY 2012-13 In-Kind Reserve Fund,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board authorizes in-kind services from the Parks, Recreation and Open Spaces Department for the March 3, 2013 "Liga Contra El Cancer's Sixth Annual Walk-A-Thon" sponsored by Liga Contra El Cancer, Inc.

in an amount not to exceed \$3,887.21 to be funded from the balance of the Office of the Chair
FY 2012-13 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Chairwoman Rebeca Sosa. It was
offered by Commissioner _____, who moved its adoption. The motion
was seconded by Commissioner _____ and upon being put to a vote, the
vote was as follows:

Rebeca Sosa, Chairwoman

Lynda Bell, Vice Chair

Bruno A. Barreiro

Jose "Pepe" Diaz

Sally A. Heyman

Jean Monestime

Sen. Javier D. Souto

Juan C. Zapata

Esteban L. Bovo, Jr.

Audrey M. Edmonson

Barbara J. Jordan

Dennis C. Moss

Xavier L. Suarez

The Chairperson thereupon declared the resolution duly passed and adopted this 5th day
of February, 2013. This resolution shall become effective ten (10) days after the date of its
adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an
override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

GKS

Gerald K. Sanchez

**MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION**

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY
ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Delores Green
Office of Strategic Business Management
111 N.W. 1st Street, Suite 2200
Miami, FL 33128

Phone: (305) 375-5143
Fax: (305) 375-5168

Type of Event/Application (select one of the following):

- ☐ District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
- ☐ Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- ☒ Special Event - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 60 days prior to event date.)
- ☐ Major Event - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)

Note: Event budget must be included for "Special" and "Major" event types.

1. Full legal name of the requesting organization: LIGA CONTRA EL CANCER, INC.
2. Applicant Status: (Select one of the choices below)
 - ☒ Not-For-Profit or Tax Exempt
 - ☐ For-Profit
 - ☐ Local Government or Public Entity
 - ☐ Other (specify): _____
3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): _____
ADRIANA CORA, EXECUTIVE VICE PRESIDENT
LIGA CONTRA EL CANCER, 2180 S.W. 12 AVENUE, MIAMI, FL 33129
(305) 856-4914 and acora@ligacontraelcancer.org
4. Specify fee waiver or in-kind service requested (quantify, if applicable): _____
LIGA CONTRA EL CANCER REQUESTS THE WAIVER OF FEES (\$3,887.21) ASSOCIATED WITH
THE USE OF TROPICAL PARK'S STADIUM, at 7900 S.W. 40 St., MIAMI, FL.

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): THE EVENT IS
LIGA CONTRA EL CANCER'S SIXTH ANNUAL WALK-A-THON, TO BE HELD ON SUNDAY, MARCH
3, 2013, starting at 7:00 AM to 5:00 PM. THE WALK-A-THON IS THE SECOND MAYOR
FUND RAISER EVENT OF THE NON-PROFIT ORGANIZATION AND THE OBJECTIVE IS TO SEEK FUNDS
TO CONTINUE PROVIDING FREE CANCER CARE TO THE POOR AND UNINSURED CANCER PATIENTS
IN MIAMI-DADE COUNTY.

6. Please select ALL that apply to event:

- ☐ Economic Development: Event supports vitality or growth of the local economy
- ☐ Youth/Education: Event benefits youth of any age and/or offers educational benefits
- ☒ Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- ☐ Arts and Culture: Event supports music, theatre, literature, art or culture
- ☐ Environmental: Event benefits environmental concerns or promotes conservation
- ☐ Sports and Athletics: Event supports/promotes organized sports or recreational participation

7. Physical address of event venues (please specify Commission District(s)): THE EVENT WILL BE HELD AT TROPICAL
PARK (STADIUM), 7900 S.W. 40 STREET, MIAMI, FLORIDA, WHICH IS SPONSORED BY
COMMISSIONER REBECA SOSA, DISTRICT 6.

8. Description of regional or local impact: THE FUND RAISER'S IMPACT AND/OR BENEFICIARY WILL BE THE
POOR AND UNINSURED CANCER PATIENTS IN MIAMI-DADE COUNTY WHO SEEK THE LEAGUE'S
FREE CANCER CARE SERVICES.

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): THE EVENT'S
SET-UP WILL START ON SATURDAY, MARCH 2, 2013 at 11:00 AM AND BREAKDOWN IS PROJECTED
TO END AT 6:00 PM ON SUNDAY, MARCH 3, 2013.

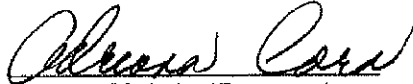
MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
Page 3

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): PLEASE SEE ATTACHMENT

11. Expected number of participants and estimated attendance (per day, if applicable): 2,000 PARTICIPANTS AND
VOLUNTEERS

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): PLEASE SEE ATTACHMENT

I hereby certify that all the statements made in this application are true and correct.


Signature of Authorized Representative
ADRIANA CORA
EXECUTIVE V.P./VOLUNTEER

1/17/2013
Date

Fee Waiver/In-kind Services Application Check List

- X 1. Is every item on the application completed?
- X 2. Is the **Full Legal Name** of the organization listed on the application? Example:
- If the legal name of an organization is "We Fight Cancer One Person At a Time, Inc." that is what the application should state and not simply, "We Fight Cancer".
- X 3. Is a copy of the non-profit status included with the application? A copy of that information can be downloaded from the Florida Corporation's Website:
- <http://www.sunbiz.org/corpweb/inquiry/cormenu.html>
- X 4. Are the following items indicated:
1. Type of Event (i.e. special, major, district, or small)
 2. Applicant Status
 3. Name of the Contact person for the organization
 4. Physical Address of the Event
 5. Specify the fee waiver or in-kind service requested
- X 5. Have you included an **event budget** for "Special" and "Major" event types?
- X 6. Has the authorized organization representative signed the application?

NOTE: ALL QUESTIONS MUST BE ANSWERED. IF ANY INFORMATION IS MISSING, THE APPLICATION WILL NOT BE ACCEPTED.

For OSBM Staff Use Only

_____ Complete package received

_____ Incomplete package, return to _____ District _____

Reason(s): _____

LIGA CONTRA EL CANCER, INC.

WALK-A-THON

BUDGET

2013

6145 · SPECIAL FUND-RAISING EVENTS

6145.03 · PICTURE FRAMES	\$ 200.00
6145.07 · PRINTING	\$ 1,500.00
6145.15 · INSURANCE	\$ 400.00
6145.19 · FOOD & BEVERAGE	\$ 1,000.00
6145.20 · RENTALS	\$ 2,000.00
6145.22 · SIGNS & BANNERS	\$ 400.00
6145.23 · ADVERTISING	\$ 600.00
6145.30 · MERCHANDISE	\$ 5,000.00
6145.39 · CLOTHING	\$ 1,500.00
6145.48 · SECURITY	\$ 1,500.00
6145.51 · MISCELLANEOUS	\$ 500.00

Total 6145 · SPECIAL FUND-RAISING EVENTS

Total Expense

\$ 14,600.00



Internal Revenue Service
District Director

Department of the Treasury

Date: MAR 13 1978

Employer Identification Number:
59-1629554

Accounting Period Ending:
June 30

Form 990 Required: ☒ Yes ☐ No

Person to Contact:

R. Wright

Contact Telephone Number:
(904) 791-2636

➤ Liga Contra El Cancer, Inc.
(League Against Cancer, Inc.)
1414 Coral Way
Miami, Florida 33145

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 509(a)(2).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. Also, you should inform us of all changes in your name or address.

Generally, you are not liable for social security (FICA) taxes unless you file a waiver of exemption certificate as provided in the Federal Insurance Contributions Act. If you have paid FICA taxes without filing the waiver, you should contact us. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

The box checked in the heading of this letter shows whether you must file Form 990, Return of Organization Exempt from Income tax. If Yes is checked, you are required to file Form 990 only if your gross receipts each year are normally more than \$10,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. The law imposes a penalty of \$10 a day, up to a maximum of \$5,000, when a return is filed late, unless there is reasonable cause for the delay.

400 West Bay St., Jacksonville, Fla. 32202

(over)

Letter 947(DO) (5-7)

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T. In this letter, we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees.

If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,

Charles D. DeWitt

District Director

cc: Mario Vuksanovic, M. D.

This determination letter supersedes our letter of December 8, 1977, holding that you do not qualify for exemption under section 501(c)(3) of the Code.

Letter 947(DQ)



Consumer's Certificate of Exemption

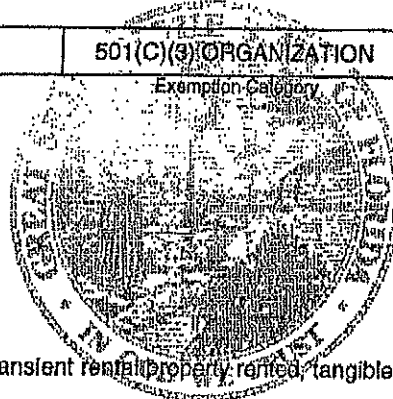
Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 04/05
02/25/09

85-8012644544C-9	02/28/2009	02/28/2014	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

LIGA CONTRA EL CANCER INC
2180 SW 12TH AVE
MIAMI FL 33129-2615



is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



Important Information for Exempt Organizations

DR-14
R. 04/05

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (FAC).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others by your organization of tangible personal property, sleeping accommodations or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, FAC).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third degree felony. Any violation will necessitate the revocation of this certificate.
6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Central Registration at 850-487-4130. The mailing address is PO BOX 6480, Tallahassee, FL 32314-6480.


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Memorandum



Date: February 5, 2013

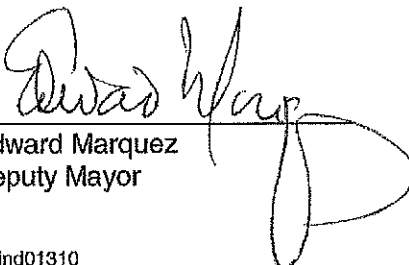
To: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor 

Subject: District Specific In-Kind Request

A waiver for in-kind services has been requested by La Liga Contra El Cancer, Inc., for their "Liga Contra El Cancer's Sixth Annual Walk-A-Thon" event held on March 3, 2013.

In-kind services have been requested in an amount not to exceed \$3,887.21 from the Parks, Recreation and Open Spaces Department for the use of Tropical Park's stadium, open area, a generator, and a stage. This event will be funded from the balance of the Office of the Chair FY 2012-13 In-Kind Reserve Fund.


Edward Marquez
Deputy Mayor

Inkind01310